

United States Patent and Trademark Office

ful

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

NOTICE OF ALLOWANCE AND FEE(S) DUE

00164

7590

03/21/2006

KINNEY & LANGE, P.A.
THE KINNEY & LANGE BUILDING
312 SOUTH THIRD STREET
MINNEAPOLIS, MN 55415-1002

EXAM	IINER
CAO, A	LLEN T
ART UNIT	PAPER NUMBER

2652

DATE MAILED: 03/21/2006

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/715,149	11/17/2003	David J. Larson	I69.12-0609	4313

TITLE OF INVENTION: HIGH MAGNETIC ANISOTROPY HARD MAGNETIC BIAS ELEMENT

1	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	NO	\$1400	\$300	\$1700	06/21/2006

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT.
RESECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS.
THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON
RETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

HOW TO REPLY TO THIS NOTICE:

Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

If the status above is to be removed, check box 5b on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

II. PART B - FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

MPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

(Z)

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/715,149 11/17/2003 David J. Larson 169.12-0669 4313 TITLE OF INVENTION: HIGH MAGNETIC ANISOTROPY HARD MAGNETIC BIAS ELEMENT APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 06/21/2006. EXAMINER ART UNIT CLASS-SUBCLASS CAO, ALLENT 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37) (37) the names of up to 3 registered patent attorneys or agent son the patent front page, list (17) the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names of up to 3 registered patent attorneys or agent son the names to a registered attorney or agent and the names of up to 3 registered patent attorneys or agent son the names to a registered attorney or agent and the names of up to 3 registered attorney or agent and the names of up to 3 registered attorney or agent and the names of up to 3 registered attorney or agent and the names of up to 3 registered attorney or agent and the names to up to 3 registered attorney or agent son the patent in the name to 3 registered attorney or agent son the patent in the name to 3 registered attorney or agent son the patent in the name to 3 registered attorney or agent son the patent in the name to 3 registered attorney or agent son the patent in the name to 3 registered attorney or agent son the patent in the patent in the patent in the name to 3	maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address			-	Note: A certificate of mailing can only be used for domestic mailings of the		
O0164 7590 03/12/006 KINNEY & LANGE, P.A. THE KINNEY & LANGE BUILDING 312 SOUTH THIRD STREET MINNEAPOLIS, MN 55415-1002 MINNEAPOLIS, MN 55415-1002 MINNEAPOLIS, MN 55415-1002 MINNEAPOLIS, MN 55415-1002 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/15,149 11/17/2003 David J. Larson 169-12-0669 APPLATYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 S300 EXAMINER ART UNIT CLASS SUBCLASS CAO, ALLENT 2652 CAO, ALLENT 2652 CAO, ALLENT 2652 CAO, ALLENT 2652 APPLEASE indication for "Fee Address" (17 Class and Internatively of a gent and the patent intorneys or agent of the patent intorneys or agent of the patent intorneys or agent of the patent intorneys or agent is identified below, the document has been filed for everouslation as each for his 75 CFR 3.11. Completion of this form in NOT a substitute for filing an assignment is identified below, the document has been filed for everouslation as each for his 75 CFR 3.11. Completion of this form in NOT a substitute of religion an assignment is identified below, the document has been filed for everouslation as each forh in 37 CFR 3.11. Completion of this form in NOT a substitute of religion an assignment is identified below, the document has been filed for everouslation as each forh in 37 CFR 3.11. Completion of this form in NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignme category or categories (with not be printed on the patent): Individual Corporation or other private group entity Government of the patent of the country or agent or the patent of the country or agent or the substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignme categories (with not be printed on the patent): Individual Corporation or other private group entity Government of the country of the patent of the country or agent or the subspice or the subspice or o					papers. Each addition	nal paper, such as an assignmente of mailing or transmission	ent or formal drawing, must
KINNEY & LANGE, P.A. THE KINNEY & LANGE BUILDING 312 SOUTH THIRD STREET MINNEAPOLIS, MN 55415-1002 MINNEAPOLIS, MN 55415-1002 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE ASSOCIATED TO STREET TO THE PLANT OF THE P	00164	7590 03/21/2006				-	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONVIRMATION NO. 10715,149 11/17/2003 David J. Larson 169.12-0669 4313 TITLE OF INVENTION: HIGH MAGNETIC ANISOTROPY HARD MAGNETIC BIAS ELEMENT APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 06/21/2006. EXAMINER ART UNIT CLASS-SUBCLASS CAO, ALLENT 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37 (37 (37 tee) 14) 14) 15 (14)	THE KINNEY & LANGE BUILDING				I hereby certify that States Postal Service addressed to the Matransmitted to the US	refrincate of Maining or Trans this Fee(s) Transmittal is bein with sufficient postage for fir ail Stop ISSUE FEE address PTO (571) 273-2885, on the c	smission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/715,149 11/17/2003 David J. Larson 169,12-0609 4313 TITLE OF INVENTION: HIGH MAGNETIC ANISOTROPY HARD MAGNETIC BIAS ELEMENT APPLY TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 06/21/2006. EXAMINER ART UNIT CLASS-SUBCLASS CAO, ALLENT 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37 CR 1.80) CR 1. 60) CR 1. 60) CR 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys of a gentles, indication for "Pee Address" indication (or "Ree Address" Indication for "Pee Address" indication for "Pee Address" indication (or "Ree Address" Indication for "Pee Address" in	MINNEAPOLIS	, MN 55415-1002					(Depositor's name)
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 100715,149 11/17/2003 David J. Larson 169,12-0609 4313 TITLE OF INVENTION: HIGH MAGNETIC ANISOTROPY HARD MAGNETIC BIAS ELEMENT AFPLN TYPE SMALL ENTITY ISSUE FEE FUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 06/21/2006. EXAMINER ART UNIT CLASS SUBCLASS CAO, ALLIEN T 2652 360-324120 Change of correspondence address or indication of "Fee Address" (37 CFR 186). 100 Change of correspondence address for indication of "Fee Address" (37 CFR 186). 100 Change of correspondence address for indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. Change of correspondence address or indication form PTOS/B1/12/2) attached. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as est forth in 37 CFR 3.11. Completion of this form is NOT a abstitute for filing an assignmen is identified below, the document has been filed for recordation as est forth in 37 CFR 3.11. Completion of this form is NOT a abstitute for filing an assignmen is identified below, the document has been filed for recordation as est forth in 37 CFR 3.11. Completion of this form							(Signature)
Interest of the property of the pattern of the patent of t	ir E						(Date)
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 \$06/21/2006. EXAMINER ART UNIT CLASS-SUBCLASS CAO, ALLEN T 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37 CR) Address from PTO/SB1/27) status. See 37 CFR 1.27. Change of correspondence address (or Change of Correspondence Address from PTO/SB1/27) status. See 37 CFR 1.27. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): I didividual Corporation or other private group entity Government of Payment by credit card. Form PTO-2038 is attached. Payment of Fee(s): Saue Fee Payment by credit card. Form PTO-2038 is attached. Payment of Fee(s): Pay	APPLICATION NO.	FILING DATE	Fì	IRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLN.TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 06/21/2006. EXAMINER ART UNIT CLASS-SUBCLASS CAO, ALLEN T 2652 360-324120 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB1/22) attached. Change of correspondence address or indication form pTO/SB1/27, and state of the patient attorneys or agents. If no name it is continued to the case of the printed on the patient from pto a single firm (having as a member a creation of the patient attorneys or agents, If no name it is printed. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) (B) RESIDENCE: (CITY and STATE OR COUNTRY) (B) RESIDENCE: (CITY and STATE OR COUNTRY) (CITE To Advance Order - # of Copies (B) Residence for more provided by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). (CITE To Be Issue Fee and Publicat	. 10/715,149	11/17/2003	•	David J. Larson	····································	I69.12-0609	4313
nonprovisional NO \$1400 \$300 \$1700 \$06/21/2006. EXAMINER ART UNIT CLASS.SUBCLASS CAQ, ALLEN T 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Address form PTO/SB/1/22) attached. Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence address for Change of Correspondence address for Change of Correspondence address for St. (1) the names of up to 3 registered attorney or agent to 13 cepts of 2 cepts of	TITLE OF INVENTION	: HIGH MAGNETIC ANISOT	ROPY HARD MAG	NETIC BIAS ELEM	MENT		
nonprovisional NO \$1400 \$300 \$1700 06/21/2006. EXAMINER ART UNIT CLASS.SUBCLASS CAO, ALLEN T 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SD1/22) attached. Change of correspondence address (or Change of Correspondence Address "10 attached." (1) the names of up to 3 registered patent attorneys or agents of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is 3 attached. In on name with the printed. A pLEASE NOTE: Unless an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT as substitute for fling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government and The following fee(s) are enclosed: (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity discussed to the country of the	1						
nonprovisional NO \$1400 \$300 \$1700 \$06/21/2006. EXAMINER ART UNIT CLASS.SUBCLASS CAQ, ALLEN T 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Address form PTO/SB/1/22) attached. Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. Change of correspondence address (or Change of Correspondence address for Change of Correspondence address for Change of Correspondence address for St. (1) the names of up to 3 registered attorney or agent to 13 cepts of 2 cepts of	<u>}</u> .						
EXAMINER CAO, ALLEN T 2652 360-324120 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/42) attached. Change of correspondence address (or Change of Correspondence Address from PTO/SB/42) attached. Change of correspondence address (or Change of Correspondence Address from PTO/SB/42) attached. Change of correspondence address (or Change of Correspondence Address from PTO/SB/47, Rev 03-02) or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the fee(s) is enclosed. Change for Entity Status (from status indicated above) Advance Order - # of Copies A check in the amount of the fee(s) is enclosed. Change in Entity Status (from status indicated above) A poplicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if ray) or to re-apply any previously paid issue fee to the application identified above. Authorized Signature Date Typed or printed name Registration No.	APPLN. TYPE	SMALL ENTITY	ISSUE FEI	E PL	IBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.543). Change of correspondence address (or Change of Correspondence Address from PTO/SB/12) attached. Change of correspondence address (or Change of Correspondence Address 'Indication for 'Fee Address' indication in 'Fee Addre	nonprovisional	NO	\$1400		\$300	\$1700	06/21/2006.
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address from PTO/SB/122 attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (If any) or to re-apply any previously paid issue fee to the application identified above. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (If any) or to re-apply any previously paid issue fee to the application identified above. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (If any) or to re-apply any previously paid issue fee to the application identified above. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (If any) or to re-apply any previously paid issue fee to the application identified above. The D	EX	AMINER	ART UNIT	r Ct	ASS-SUBCLASS]	
CRR 1.53). Change of correspondence address (or Change of Correspondence Address form PTOVSB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTOVSB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTOVSB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTOVSB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTOVSB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTOVSB/122) attached. Change of correspondence address (or Change of Correspondence address form PTOVSB/122) attached. Change of correspondence address (or Change of Correspondence or agents of the Address form PTOVSB/122) attached. Change in Entity Status (from status indicated above) A check in the amount of the fee(s) is enclosed. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Change in Entity Status (from status indicated above) A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Change in Entity Status (from status indicated above) A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of the fee(s) is enclosed. Check in the amount of t	CAO	, ALLEN T	2652		360-324120	_	
Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PIEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment is required. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent):	1. Change of corresponde	nce address or indication of "F	ee Address" (37			•	
PFee Address" indication (or "Fee Address" Indication form PIO/SB47, Rev 03-02" or more recent) attached. Use of a Customer Number is required. A SSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government	. — ′	ondence address (or Change of	Correspondence	(1) the names of u or agents OR, alter	ip to 3 registered pate natively,	ent attorneys 1	
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Steed, no name will be printed.	·			(2) the name of a s	single firm (having as	a member a 2	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s): Issue Fee	PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2 registered patent	attorneys or agents. I		
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government as the following fee(s) are enclosed: A. The following fee(s) are enclosed:	Ť			•	** /		
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) A applicant claims SMALL ENTITY status. See 37 CFR 1.27. D b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature	PLEASE NOTE: Unl recordation as set fortl	ess an assignee is identified be in in 37 CFR 3.11. Completion	elow, no assignee da of this form is NOT	ata will appear on the substitute for filing	he patent. If an assig g an assignment.	gnee is identified below, the d	ocument has been filed for
4b. Payment of Fee(s): Issue Fee						COUNTRY)	
4b. Payment of Fee(s): Issue Fee	*						
4b. Payment of Fee(s): Issue Fee	Nama akada da asasasa		of 7. of 11 1 1				. Da
Issue Fee	riease check the appropri	ate assignee category or category	ories (will not be prin	ited on the patent):	Individual U	corporation or other private gre	oup entity Government
Publication Fee (No small entity discount permitted) Advance Order - # of Copies		re enclosed:	_	_•			
Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date		o small entity discount nermitte					
Deposit Account Number				The Director is hereby authorized by charge the required fee(s) or credit any overnayment to			
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature				Deposit Account	Number	(enclose an extr	a copy of this form).
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature		•	·	b. Applicant is no	longer claiming SM	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
Authorized Signature Date Typed or printed name Registration No This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)	The Director of the USPT	O is requested to apply the Issi Publication Fee (if required)					
Typed or printed name Registration No	interest as shown by the r	ecords of the United States Pat	ent and Trademark C	Office.			
Typed or printed name Registration No	Authorized Signature				Date		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and the completed explicit the completed explicit the complete of	Typed or printed name						
an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and	This collection of informa	ition is required by 37 CFR 1.3	11. The information	is required to obtain	or retain a benefit by	the public which is to file (and	by the USPTO to process)
submitting the completed application form to the OSF 10. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete	an application. Confident submitting the completed	ality is governed by 35 U.S.C application form to the USPT	. 122 and 37 CFR 1. O. Time will vary d	 This collection i lepending upon the i 	s estimated to take 12 ndividual case. Any o	minutes to complete, including comments on the amount of time	ng gathering, preparing, and me you require to complete
an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.	mis form and/or suggestion and suggestion in the	ons for reducing this burden, sl irginia 22313-1450. DO NOT	nould be sent to the C SEND FEES OR CC	Unier Information O OMPLETED FORM	fficer, U.S. Patent and STO THIS ADDRES	d Trademark Office, U.S. Department of the Commissioner of the Com	artment of Commerce, P.O. for Patents, P.O. Box 1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

APPLICATION NO. FILING DATE		LING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/715,149	0/715,149 11/17/2003		David J. Larson	I69.12-0609	4313
00164	00164 7590 03/21/2006			EXAM	INER
KINNEY &	LANGE, P	CAO, AI	CAO, ALLEN T		
THE KINNEY & LANGE BUILDING				ART UNIT	PAPER NUMBER
312 SOUTH THIRD STREET MINNEAPOLIS, MN 55415-1002			2652 DATE MAILED: 03/21/2000		

Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 235 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 235 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.